## PART B – FEE(S) TRANSMITTAL

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49444 75		Fee(s) Transmittal. This certificate cannot be use accompanying papers. Each additional paper, such as			ed for any other an assignment or			
PEARL COHEN ZI 1500 BROADWAY NEW YORK, NY 1			formal drawing, must have its own certificate of mailing or transmission.  Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with t United States Postal Service with sufficient postage for first class mail in envelope addressed to the Mail Stop ISSUE FEE address above, or bei facstimilie transmitted to the USPTO (571) 273-2885, on the date indicat below.			deposited with the first class mail in an ess above, or being n the date indicated		
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APPLICATION NO. FILING DATE FIRST NAMEL			INVENTOR	NVENTOR ATTORNEY DOCKET CONFIRMATION 1			I NO.	
10/608,067	.G, Boris		P-5760-US	7827				
TITLE OF INVENTION: METHOD AND APPARATUS TO PROVIDE CHANNEL ACCESS PARAMETER								
		FEE DUE PUBLIC 1,440	\$300	PR	EV. PAID ISSUE FEE \$0	*1,740	E	04/07/2008
EXAMINE	TR .	ART UNIT	CLASS-SUBCLA	ASS	٦			
PHAN, TRI		2616	370-447000		<b>-</b>			
1. Change of correspon Address" (37 CFR 1.363)  Change of corr Correspondence Address  "Fee Address" indic PTO/SB/47; Rev 03-02 Customer Number is re	2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (have as a member a registered attorney or agent) and the names of up to two registered patent attorneys or agents. If no name is listed, no name will be printed.  1 PEARL COHEN ZEDEK  2 LATZER, LLP  3							
3. ASSIGNEE NAME AT PLEASE NOTE: Unle filed for recordation as se	ss an assignee is ide	ntified below, no assig	nee data will appear	on the	patent. If an assignee i	is identified below, the	locun	nent has been
(A) NAME OF ASSIGNEE			(B) RESIDENCE: (CITY and STATE OR COUNTRY)					
INTEL CORPORA	2200 Mission College Blvd., Mailstop SC4-202, Santa Clara, CA 95052-8119, USA							
Please check the appropriate a	ssignee category or ca	tegories (will not be prir	nted on the patent):	Indi	vidual 🗷 Corporation	or other private group en	tity [	Government
4a. The following fees(s) are enclosed:  4b. Payment of Fee(s):  ☐ A check in the amount of the fee(s) is enclosed.								
☑ Publication Fee (No small entity discount permitted) ☐ Payment by credit card. Form PTO-2038 is attached.								
Advance Order - #	☑ The Director is hereby authorized to charge the required fee(s), or credit any overpayment to Deposit Account Number 50-3355 (enclose an extra copy of this form)							
5. The following fees(s) are	enclosed:	uc See 37 CFR 1 27	□ h Applicant	is no lo	onger claiming SMALL	ENTITY status. See 37 C	FR 1.	27(g)(2).
NOTE: The Issue Fee and or other party in interest a	l Publication Ree (if	required) will not be a	ccepted from anyone	e other	than the applicant; a re			
Authorized Signature:	Date: April 3, 2008							
Typed or printed name:	Registration Number: 37,912							
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